



Docket No.: M4065.0531/P531-A  
(PATENT)

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In re Patent Application of:  
Werner Juengling, et al.

Examiner: Walter L. Lindsay, Jr.

Application No.: 10/673,362

Art Unit: 2812

Filed: September 30, 2003

For: A TRANSISTOR GATE STRUCTURE

**AMENDMENT IN RESPONSE TO FINAL OFFICE ACTION**

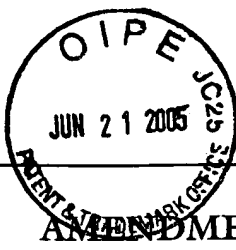
Commissioner for Patents  
MS: AF  
P.O. Box 1450  
Alexandria, VA 22313-1450

Dear Sir:

This paper is in response to the Office Action dated March 23, 2005. Please amend the above-identified U.S. patent application as follows:

**Amendments to the Claims** are reflected in the listing of claims which begins on page 2 of this paper.

**Remarks** begin on page 10 of this paper.



AF ZFW

AMENDMENT TRANSMITTAL LETTER			Docket No. M4065.0531/P531-A	
Application No. 10/673,362	Filing Date September 30, 2003	Examiner Walter L. Lindsay, Jr.	Art Unit 2812	
Applicant(s): Werner Juengling, et al.				
Invention: A TRANSISTOR GATE STRUCTURE				
<b>TO THE COMMISSIONER FOR PATENTS</b>				
Transmitted herewith is an amendment in the above-identified application. The fee has been calculated and is transmitted as shown below.				
<b>CLAIMS AS AMENDED</b>				
	Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate
Total Claims	30	- 52 =		x 0.00
Independent Claims	6	- 8 =		x 0.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>				
Other fee (please specify):				
<b>TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:</b>				0.00
<input checked="" type="checkbox"/> Large Entity <input type="checkbox"/> Small Entity				
<input checked="" type="checkbox"/> No additional fee is required for this amendment.				
<input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of \$ _____. A duplicate copy of this sheet is enclosed.				
<input type="checkbox"/> A check in the amount of \$ _____ to cover the filing fee is enclosed.				
<input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.				
<input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge and credit Deposit Account No. <u>04-1073</u> as described below. A duplicate copy of this sheet is enclosed.				
<input checked="" type="checkbox"/> Credit any overpayment.				
<input checked="" type="checkbox"/> Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17.				
Thomas J. D'Amico Attorney Reg. No.: 28,371 DICKSTEIN SHAPIRO MORIN & OSHINSKY LLP 2101 L Street NW Washington, DC 20037-1526 (202) 828-2232			Dated: <u>June 21, 2005</u>	